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## N THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	ALLAMON et al.	Examiner:	Ashford S. Hayles
Application No.:	10/614,331	Art Unit:	3687
Filed:	July 3, 2003	Docket No.:	ARIBP068
Title:	AUTOMATED LOTTING		

## **CERTIFICATE OF MAILING**

I hereby certify that this corresponder	nce is being deposited with the United States
	a prepaid envelope addressed to:Mail Stop
RCE, Commissioner for Patents, P.O.	D. Box 1450, Alexandria, VA 22313-1450
on: #/29 ,2009.	AUL >
<del></del>	Veronica Pula

## REQUEST FOR CONTINUED EXAMINATION (RCE). TRANSMITTAL FILED WITH COMMUNICATION D

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application.

1. Sı	ubmissioi	n required und	er 37 CFR §1.114				
	a. 🗌	Previously su	ibmitted: Consider the amendment(s)/s	reply under 37 CFR §1.116	previously		
		filed	on		<del></del>		
			Consider the arguments in the Appeal Brief or Reply Brief previously				
		filed	on				
			Other				
b. 🛛 Enclos		Enclosed:		05/05/2009 SDENBOB3 00000	3017 10614331		
		$\boxtimes$	Amendment/Reply	01 FC:1801	810.00 OP		
			Affidavit(s)/Declaration(s)				
			Information Disclosure State	ement (IDS)			
			Other				

ATTORNEY DOCKET NO. ARIBP068 Application No.: 10/614,331

c. Fee Calculation: The fee for excess claims, if applicable, has been calculated as shown below.

				Small Entity			Large Entity	
			Ī	Rate	Fee		Rate	Fee `
RCE FILING FEE		x \$405 = \$		OR	x \$810 = \$	810.00		
CLAIMS	After RCE	*HP	Extra					
Total	20	20		x \$26 = \$		OR	x \$52 = \$	
Independent	3	4		x \$110 = \$		OR	x \$220 = \$	
Multiple Dependent Claims -0-			x \$195 = \$		OR	x \$390 = \$		
*HP = Highest previously paid			TOTAL FEES \$			TOTAL FEES \$	810.00	

*HP = Highest previously paid			TAL FEES\$		то	TAL FEES\$	810.00	
2. Miscellaneous:		·						
a. $\square$ Sus	spension of action of	on th	e above-ide	entifie	d applica	ation is requ	uested under	
<del></del>	.103(c) for a period					•		
b ∏ Oth	• •							
. •			***					
3. Applicant 1	hereby petitions for	r an	extension o	f time	as follo	ws:		
	, F		SMALL				RGE ENTITY	
			Rate	Add'l	Fee	Rate	Add'l Fee	
☐ Extension for Response v	within FIRST month		x \$65 = \$		OI			
Extension for Response			x \$245 = \$		OI			
Extension for Response			x \$555 = \$		OI	<del></del>	<del></del>	
Extension for Response		<u> </u>	x \$865 = \$	<u> </u>	OI			
Extension for Response	vithin FIFTH month		x \$1175 = \$		OI	x = x = 2350 =	\$	
\$ to cover the R and/or extension of time f 7.	e Deposit Account CE Fee required unless. d fees are missing please charge such	No. nder or an n fee	50-0685 ( 37 CFR §1 ny addition as or credit a st Form.	ARIB .17 (e) al fees any ov	P068 ) in the adare requerer are requerer.	in the amou ditional clar aired during ent to Depo	nt of im fee, if any, the pendency	
	10050 N. F	ootl	I & JAME nill Blvd., S o, CA 9501	te. 20			·	
Date: 4 79 09			Robyn	Wagne	er			

Roeyn Wagner Reg. No. 50,575 V 408-973-2596 F 408-973-2595